

Central MRS Meeting Notes  
January 22, 2007  
Rowan County Library

Counties Present: Cabarrus, Guilford, Mecklenburg, Rowan, Stanly.

Introductions

News from Raleigh

Evaluation Update

    Data on Findings

    CFT Feedback Survey

Report on National Differential Response Conference

Moving Forward

News from Raleigh

- Work for the 2007 Federal Review continues.
  - Mecklenburg, Nash, and Catawba are the three counties that will be reviewed.
  - We have given the Feds the self assessment.
- Are in the final stages of updating Chapter 8. Should be ready around the end of the month.
  - Significant overhaul – have rolled in admin letters and MRS manual.
  - Will be put on web as soon as hard copy is released to counties. The web version will include hyperlinks to other policy, legislation, etc. that may be referenced.
- MRS Learning Institute – will be in Asheville this year in August 27-29<sup>th</sup>. (Spread out in each region over the state over 3 years.)

Evaluation Update

- Central Registry statistics are now on the web for SFY 2006-2007.
- The experience report will be on line by end of week if not already.
- MRS should be available on DataWarehouse within approximately 2 months
- Duke
  - Waiting on approval from the Division for the Consent forms to conduct phone interviews from the original 10.
  - Rather than writing a “blurb” that was requested at the meeting of the Pilot 10, they reworked the consent form and made it simpler to understand.
  - Have all 10 counties schedules to do focus groups.
  - Will be completing a “fact sheet” but not sure when it will be ready.
- CFT Feedback form – there is a feedback form that is used with System of Care that we are talking about tweaking and using for MRS CFTs.
  - Holly asked who was currently using some kind of feedback forms.
  - Rowan is and they find it very helpful.
  - Mecklenburg also has used one as well. They learned that people felt their meetings were going too long.
  - Guilford has 2 full time facilitators and supervisors and some social workers are trained as back ups. They have a feedback form they ask families and professional partners to complete.

### Report on Differential Response Conference

In November Holly, Nicole, Sara, folks from AFI, Catawba, and Guilford were able to attend this conference.

- First national differential conference.
- 15 states using differential response. (Feds define Differential Response as a way to take accepted CPS reports and offer services where no maltreatment is identified. They found out that several states that thought they were doing Differential Response were actually not. Those states were taking follow up action with the screened out reports which is not Differential Response.)
- Arizona, Texas, and Delaware tried Differential Response and have gone back.
- Florida tried it, stopped, and is doing it again.
- Holly has information about which specific states are doing what specific aspects of Differential Response.
- Some states do not allow family assessments if there are any children under the age of 5.
- Some allow family assessments in foster home reports.
- Minnesota is doing 57.5% of their reports as family assessments.

Culture Shock – must change the culture of dealing with families.

- Heard from everyone there, that in order to make this work there must be a true shift in practice and philosophy not only from the DSS but from the community as well.
  - Must invest in training that is ongoing to sustain this change.
  - Reframing relationships – how the state works with private, county, and community organizations, how the county works with their community agencies, and how counties and community agencies work with counties.
  - All relationships must be about respect, integrity, and being genuine.
- Massachusetts – planning to start on 2010 - shared they have found that:
  - People have more confidence and comfort to journey to the future when they carry forward parts of the past, but those parts of the past we carry should be the best parts.
  - Must have a willingness to take risks!
- Lessons Learned from Other States
  - Child Protection is not a job for DSS alone, requires the community to put forth a coordinated effort (System of Care). DSS may need to be the leaders but can't go it alone.
  - The best way to rescue a child is to rescue the family of that child.
  - Avoid benign neglect of the process and have regular meetings to discuss issues (like these monthly meetings).
  - Evaluation data was able to say that families liked the multiple response approach better.
  - Information sharing is imperative. If we are going to ask communities to join us in keeping children safe, we need to be able to give them some information.
  - Plan works best when developed with families, DSS, and community partners. Not just the case plan, but overarching plans.
  - Continue to talk to staff about the shift in philosophy and what is expected of them.

#### Results from Minnesota:

- Able to say that the safety of children was improved since the start of Differential Response.
- Removals and maltreatment were reduced. Could show this with data. (NC can say it has not gotten worse, but we can't show it has improved.)
- Also, removals, repeat maltreatment, and long term costs to the agencies were reduced (over 6 years since it started).
- The single most critical thing was to change how they thought about families.
- The process and results need to be shared continuously.
- Want to think about is where are we going in MRS and what else can we do.
  - Looking at screened out reports. Other states said that 40% of those families had a previous CPS report, so they are not so different from families that are screened in.
  - Families are 75% more likely to accept other community services when the CPS worker and the community provider make the initial home visit together.
  - CPS does not need to be the first (or only) option. One state has a county that is training their community not to think of DSS first. Getting trained on what is available in the community and how to make those referrals.
  - Things we think about – how do we sustain what we have already gained and how to we build on it?
- Question – do people have confidentiality issues?
  - There was a Dear County Director letter sent out sometime in Summer of 2006 that addresses information sharing confidentiality issues between agencies.
  - The CFT program in the schools and System of Care is working to educate people, not just schools, but a concentration of people from the educational system, that they must be honest with families. Can't just report stuff to DSS and let them be the bad guy while they don't get involved.
  - Cleveland offered facilitator training for their staff and invited the school system people too, and they responded very positively to this. (Obviously everyone can't do this, but it worked well for them.)

#### Moving Forward

In November Holly had asked people to report out like we used to do.

Based on those results Holly read some statements and had folks rate their county based on how well they are you doing. Then we can figure out how to move forward. Made one side of the room “1” and the other “10”

#### 1. Always discuss the assessment process with the family.

People that were more in the middle asked the counties closer to 10 if their workers had a primary role (as assessor or investigator). One did, but they would fill in for the other if workers overloaded or shortstaffed. The other has changed, and now has one worker that does both. Moving to blended job functions (keeping case into case management as well) because it maximizes resources.

The ones in the middle have not been doing it as long as the folks closer to the 10 side. Mecklenburg created a brochure, and a checkbox form so that their narrative would be shorter and they would not have to write out their explanation process each time (because they takes a long time).

Patrick's county used to include the brochure in the screened out report to the reporter. Also used checkboxes with comment section.

It is not a linear process. You could be a 9 today and with staff change and not repeatedly talking about it you may go back to a 5 or 6.

2. You consistently talk with WF about CPS cases also open with WF.

Counties that doing it well, what is their process? Check OLV and then their workers are told to call the WF worker and talk about the information that the WF worker has on the family. This is collaboration, doesn't mean that WF has to be in every CFT or anything. Rowan doing it well, and not in the same bldg either, but have decided they can email instead of trying to catch each other on the phone.

Mecklenburg – one district has WF co-located and their collaboration is great, but the other districts are not co-located and especially in a big city, it makes it hard to get together. They did a match and were actually surprised at the relatively small number of WF cases that were also CPS cases. Usually these families have had involvement with both at some point in their lives, but not at the same time.

Guilford would like to get better at inviting WF to case decisions. They have started having socials with each other.

At what point do they check the system to see if there is WF involvement? Mecklenburg makes it a part of intake and they become a required collateral if there is WF involvement.

3. How are your workers doing with partnering with the family on the risk assessment and the strengths and needs assessment?

The ones that have trouble doing it with the family say it is because it requires additional contacts with collaterals so if they do it just with the family on the 1<sup>st</sup> visit, it ends up being incorrect. Instead they talk about the process with the family. Some of the other counties do it on the 2<sup>nd</sup> visit so that they have the information from the collaterals by the time they sit with the families. Holly has had people who did it on the 2<sup>nd</sup> visit, and some that did it on the 1<sup>st</sup> but told them they would be getting more information from collaterals and that if that information required a change, that they would be back to discuss it again.

Believe that doing this with the family truly helps families to understand the process better.

4. How many workers discuss the CFT at the first visit?

In the initial explanation of the process of family assessment they talk about what will happen if they are found in need of services, they will go to case management, and that CFT would be part of those, so they get to it that way.

5. Use family ideas on the case plan.

Folks here today were pretty strong in this area. One case the family made a plan and DSS knew that this plan would not work (but would not present risk to the child) so they let the family do it, and it failed. But because they let the family try it, when the kids did end up in foster care, the family was more accepting of it, and it also made the DSS case stronger in court. Often other agencies find this too, that it

makes like easier in court when it goes that route, because there is a trail that DSS has given the family input and opportunities.

1-800-FOR-BABY – a good program for mom and young babies that deals with substance abuse. Mom gets to keep her baby as long as she is progressing in the program. Rowan shared this resource.

6. Case Plan is completed during the CFT.

One county that started more recently does not have exclusive facilitators, and are new enough to the meetings that when the meetings get chaotic the SW has trouble keeping the meeting on track and writing the case plan at the same time. Plus they have are shortstaffed and had caseloads of 30+ for a time.

Mecklenburg has a report that runs for all cases open more than 120 days. If there are cases on this report there must be an explanation by the supervisor of why that case is still open.

7. There are activities on the case plan for other people besides DSS and family to do (grandma, IFPS, community partners).

Everyone here felt pretty good about this and think they did it well before MRS.

8. Shared Parenting meetings with 7 days.

Most people good (or at least within 8)

9. More than just the one Shared Parenting meetings.

Yes, may be very informal, or may have FP supervising visitation and going with Biological Parents to doctors.

10. Law Enforcement making a joint visit in abuse cases.

When they are available. Sex abuse cases present different issues and different counties have different procedures, particularly around Child Advocacy Centers.

11. Children are interviewed one time.

As much as possible in the situations where they have the control (hospitals may do their own, but we keep it at one in the CPS level.)

Perpetrators leaving the home: Different counties have different approaches to asking the perpetrator to leave the home. Depending on the situation they may ask them to leave (and present it as protection for the alleged perp as well if the allegations turn out to be false). Otherwise may ask non offending parent to determine where the child can stay as a safety resource. Attorneys have cautioned that DSS does not have the legal right to ask the perp to leave for just allegations.

12. Always offer the opportunity for the families to be present at professional collaterals.

Do pretty well.

Professional collaterals– up to the parents to decide if they want to be there

Non-professional collaterals – up to the collateral to decide if they are comfortable with the parents being there.

### Other Issues

Expunction - January 5<sup>th</sup> 2007 Admin letter Clarification of the Process

- Has been lots of discussion in different forums regarding this letter.
- This letter is currently policy and it will stand, however the Division recognizes that expunction is new, and relates to Legislation that is out of our control, therefore it is possible that it will change.
- In cases where you file your petition prior to case decision you no longer have to wait to make your case decision until after adjudication.
- If the judge adjudicates neglect, and you got there through an investigative assessment, your finding will automatically be serious neglect.
- In this case we are saying that if it was serious enough to file a petition, then it rises to the level of serious neglect.
- (This is also the persons due process for expunction, they can't file an appeal after if it was already in court.)
- When a family assessment is done and DSS files a petition during the assessment, the agency has to determine if the case should switch tracks. This decision to switch tracks is the local agencies decision to make.
- This brings up the question – if you file a petition during an assessment, are you automatically switching to investigative? You are NOT required to do so, but many people feel that if the situation is serious enough for you to be filing a petition, then it is also serious enough to rise to serious neglect, and therefore switch it to the investigative assessment track.
- Some counties here felt strongly that if they were requesting custody they should always switch to investigative assessment because that was serious neglect (or they would not be requesting custody.)

Future Meetings –

Central – Guilford Co DSS February 22.